



**Ministry of Health and
Long-Term Care**

**Ministère de la Santé et des
Soins de longue durée**

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**Rapport d'inspection sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Health System Accountability and
Performance Division
Performance Improvement and
Compliance Branch**

**Division de la responsabilisation et de la
performance du système de santé
Direction de l'amélioration de la
performance et de la conformité**

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Public Copy/Copie du public

Report Date(s) / Date(s) du apport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Feb 23, 2016	2016_253614_0002	032589-15	Complaint

Licensee/Titulaire de permis

Schlegel Villages Inc
325 Max Becker Drive Suite 201 KITCHENER ON N2E 4H5

Long-Term Care Home/Foyer de soins de longue durée

THE VILLAGE OF RIVERSIDE GLEN
60 WOODLAWN ROAD EAST GUELPH ON N1H 8M8

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

CAROLYN MCLEOD (614)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): January 22, 27, 28, 29 and February 2, 2016.

When in the home the inspector toured the resident home areas, provision of resident care, recreational activities, staff/resident interactions, infection prevention and control procedures, relevant policies and procedures, clinical records as well as meeting minutes pertaining to the inspection.

PLEASE NOTE: A Written Notification, Voluntary Plan of Compliance (WN #1,VPC) under the Long Term Care Homes Act, 2007, S.O. 2007, c.8 s.6.(1)(c) identified in this inspection (Log#032589) will be issued under an RQI Inspection #2016_448155_0002, Log #000864-16, concurrently inspected during this inspection.

During the course of the inspection, the inspector(s) spoke with The Assistant General Manager, the Director of Nursing Care, the Assistant Director of Nursing care, one Neighborhood Coordinator, the Kinesiologist, two Registered Practical Nurses, two Personal Care Assistants, a physician, residents, family members.

**The following Inspection Protocols were used during this inspection:
Hospitalization and Change in Condition
Pain
Personal Support Services
Prevention of Abuse, Neglect and Retaliation
Responsive Behaviours**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

Legend	Legendé
WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order	WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités
Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).	Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.
The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.	Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.

WN #1: The Licensee has failed to comply with O.Reg 79/10, s. 34. Oral care



Specifically failed to comply with the following:

- s. 34. (1) Every licensee of a long-term care home shall ensure that each resident of the home receives oral care to maintain the integrity of the oral tissue that includes,**
- (a) mouth care in the morning and evening, including the cleaning of dentures; O. Reg. 79/10, s. 34 (1).**
 - (b) physical assistance or cuing to help a resident who cannot, for any reason, brush his or her own teeth; and O. Reg. 79/10, s. 34 (1).**
 - (c) an offer of an annual dental assessment and other preventive dental services, subject to payment being authorized by the resident or the resident's substitute decision-maker, if payment is required. O. Reg. 79/10, s. 34 (1).**

Findings/Faits saillants :

1. The licensee has failed to ensure that the resident received oral care to maintain the integrity of the oral tissue, including mouth care in the morning and evening, and cleaning of dentures.

A review of the care plan for the resident, indicated that the resident had dentures in place in their mouth and observations made of the resident confirmed this.

During an interview, staff shared that the resident brushed their teeth independently when set up. The resident's care plan indicated that they were to be assisted with mouth care twice daily.

A review of the personal observation and monitoring forms for a specific period of time, indicated that the resident did not receive mouth care 35 per cent of the time for that time period.

During an interview, with the Assistant General Manager, it was confirmed that the documentation indicated that the resident did not receive mouth care twice daily.

The licensee failed to ensure that the resident received oral care to maintain the integrity of the oral tissue, including mouth care, and the brushing of her dentures, in the morning and the evening. [s. 34. (1) (a)]



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Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that residents receive oral care to maintain the integrity of the oral tissue, mouth care in the morning and evening, and/or cleaning of dentures, to be implemented voluntarily.

Issued on this 23rd day of February, 2016

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Original report signed by the inspector.